OBTRP OBTRG OBTRS 01/01/07

 DATE RECEIVED
 AGE STRUCTURES
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NMFS FISHERIES OBSERVER PROGRAM												1	cc	CONTRACT AREA CODE				2		_	
<b>VESSEL AND TR</b>	VESSEL AND TRIP INFORMATION LOG													VE	VENDOR I.D. CODE				3		
OBS/TRIP ID VESSEL NUMBER # 1						٧	VESSEL NAME # 1				EXPECTED TRIP DUR			DATE SA	DATE SAILED mm/dd/yy			TIME	SAILED	24 h	_
		5					6				7			8					9		
											day(s)		/			/					
TRIP TYPE <b>10</b>	JMBER	# 2	VESS	EL NAM	1E # 2	DEALER'S			ME		CREW SIZE (Including Captain)		DATE LANDED 15			nm/dd/yy	TIME	TIME LANDED			
Single Gear 1 <b>11</b> Multiple Gear 2				12				13			14								:	16	
HOME PORT (CITY,STATE	PORT	SAILED (CIT	ΓΥ, STAT	E) COD	DE P	PORT LANDED (CITY, STAT			TE) CODE					RIAL NUMBER				STEAM TIME 25			
17 18		19			2	20	21			22	No	0				<u> </u>					
ICE USED FUEL	LISED										Yes	COSTS								• hrs	
26	0025	27	DAMAGE/LO		S* <b>28</b> SUPPLIES * Unknown			DD nown			ON) <b>3</b> '	FUEL (PER GAL)32 Unknown		WATER Unknown		<b>33</b> (	OIL Jnknown <sub>-</sub>		BAIT Unknow	wn	35
tn		gal	\$	00	\$					\$		\$	·		00		§			0	0
GEAR INFORMATION (IN USE & STOWED)																		TIME	LOST *		_
PRIMARY GEAR <b>36</b>		No			0 40 4		RD #	SOAK <b>2</b>	CAF	PT EXP (yrs) 43	TARG	SET SPECIES 44			CODE(S) <b>45</b>			SON <b>46</b>		MOUNT <b>47</b>	
OTHER GEAR 1		CODE	Yes	1 USED?	_	# ONBF	2D #	SOAK	CAL	PT EXP (yrs)	TADO	SET SPECIES	9	C	DDE(S)				·	hrs	
38			No	0 1		# ONDI		OOAK	CA	T LAF (yls)	IANG	JET OF LOIL	3		DDL(3)				·	hrs	
OTHER GEAR 2		CODE		USED?		# ONBF	RD #	SOAK	CAF	PT EXP (yrs)	TARG	SET SPECIES	S	C	DDE(S)					hrs	
38		39	No Yes	0 1	_															hrs	
OTHER GEAR 3 <b>38</b>		CODE 39	No	USED? 0		# ONBF	RD #	SOAK	CAF	PT EXP (yrs)	TARG	GET SPECIES	S	C	DDE(S)					hrs	
			Yes	1																	_
# TRIP HAULS <b>48</b>	PRIMARY	SPECIE: <b>50</b>	S LANDED								S	OAKED? <b>51</b>	М	SC   XED?   <b>52</b>			S ONLY BAGS 53	A	VERAGE V	WGT/BAG	
# UNOBSERVED HAULS 49		30									No Yes	0 1	No Yes	0 1			33			lb	
COMMENTS	1												1								_
• = 1																					
* Fields that require a comment	t																				_

IN-OFFICE